



## ***BENEFITS GUIDE***

**Follow The  
Benefits  
Road**

***Health 3 Miles***

***Dental 11 Miles***

***LTD 12 Miles***

***Flex 13 Miles***

***Voluntary 19 Miles***

**Voluntary**  
Around the  
Bend

**Life**  
Slow  
Down

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# WELCOME TO THE CITY OF FORT WORTH'S BENEFITS GUIDE

## TAKE THE FIRST STEP . . .

*to understanding your employee benefits.*

The City of Fort Worth is pleased to offer you a plan of benefits that helps you stay healthy and afford quality care when you need it.

To make the best use of your benefits — and the special features that come with them — it's important to understand what they offer and how they work. So take the first step. Just turn the page to *Follow the Benefits Road.*



## WHO'S ELIGIBLE

You are eligible to participate in the program if you are a regular full-time or part-time employee of the City of Fort Worth and are scheduled to work at least 20 hours per week. Seasonal part-time employees who work less than 20 hours per week and temporary employees (S01s) are not eligible for benefits.

## WHO'S AN ELIGIBLE DEPENDENT

To be eligible to enroll as a dependent, a person must be:

- the spouse of an enrolled employee, or
- a dependent of an enrolled employee who is an unmarried natural child, foster child, stepchild, legally adopted child or child under the Member's legal guardianship or custodianship, residing with the Members or with the Member's present or former spouse.

You can elect coverage for yourself, your spouse, and any other eligible dependent if the benefit is available to dependents.

**This Way to Better Health**

# HEALTH PLAN

## HOW THE PLAN WORKS

*Freedom of choice and three levels of benefits.*

The Health Plan gives you the freedom to choose your doctor or health care facility when you need health care. How much you pay for your care out of your own pocket depends on whether the expense is covered by the plan and whether you choose an in-network or out-of-network provider.

There are three options under the Health Plan: Basic, Basic Plus and Select. Check the charts in ***Your Benefits at a Glance*** in this section to get an idea of your costs under each plan option.

### THE AETNA PROVIDER NETWORK

You and your covered family members can receive care from doctors and facilities that belong to Aetna's network. The providers in the network represent a wide range of services, from basic, routine care (general practitioners, pediatricians, internists), to specialty care (OB/GYNs, cardiologists, urologists), to health care facilities (hospitals, skilled nursing facilities).

To find in-network providers in your area, you can use **DocFind®**, Aetna's online provider directory. Go to [www.aetna.com](http://www.aetna.com) and click on the **DocFind** shortcut. Follow the steps to enter your specific search criteria. When prompted to "Select a Plan", choose "Aetna Open Access® Plans" then click on "Aetna Choice® POS II".



*Get to Know  
Your  
Provider*

## WHEN CAN YOU JOIN OR ADD A DEPENDENT TO THE HEALTH PLAN?

1. During the first 30 days of eligibility following **employment or**
2. Within 30 days of a Change in Family Status which includes birth or adoption of a child, marriage or divorce, death, the loss of other health coverage **or**
3. At Open Enrollment an employee who is not participating in the health or dental can join the plans or add or drop dependents. In addition, an employee can elect to change the level of coverage for medical or dental coverage during Open Enrollment. **Open Enrollment is usually held each October.** Changes made during Open Enrollment are effective the following January.



**Save Money!  
Use an  
In-Network  
Provider  
Instead of an  
Out-of  
Network  
Provider**

If your doctor is not in the Aetna network, you may still visit him or her and receive benefits at the out-of-network level (see the charts to follow). You also can ask him or her to call Aetna's Member Services to find out about joining the network.

### USING IN-NETWORK AND OUT-OF-NETWORK PROVIDERS

When you need care, you have a choice. You can select a doctor or facility that belongs to the network (in-network) or one that does not belong (out-of-network).

- **If you use an in-network provider**, you'll pay less out of your own pocket for your care. You won't have to fill out claim forms, because your network provider will file claims for you.
- **If you use an out-of-network provider**, you'll pay more out of your own pocket for your care and you may be required to file your own claims. Also the plan only pays up to the reasonable and customary limit. If the provider charges more than the reasonable and customary limit, you will be billed for any amount that exceeds the reasonable and customary charge.

### SHARING THE COST

You share in the cost of your care by either paying a copay or meeting a deductible and coinsurance for covered expenses.

### COPAYMENTS

A copayment (or copay) is a flat fee paid for a covered expense. When a copay applies to a given expense, you don't need to meet the annual deductible. You simply pay the copay

at the time you receive the covered service or supply. Some copay amounts are shown in the charts in ***Your Benefits at a Glance***.

### THE ANNUAL DEDUCTIBLE

The annual deductible is the amount of covered expenses you must pay each year for certain expenses before the plan starts to pay benefits. The deductible applies to certain type of expenses such as:

- Outpatient surgery
- Inpatient hospital care
- MRIs and CT scans
- Outpatient X-ray or lab performed in a hospital
- Durable medical equipment

The amount of the deductible depends on whether you use in-network or out-of-network providers (see the charts in ***Your Benefits at a Glance***).

### COINSURANCE AND COINSURANCE MAXIMUM

For expenses that do not have a copay, you must meet the annual deductible, then the plan pays a percentage of the expenses and you pay the rest. Your share of the expense is called your coinsurance. For example, if the plan pays 80 percent of an expense, your coinsurance is 20 percent.

The plan puts a limit — called the coinsurance maximum — on your share of covered expenses which are subject to the deductible and coinsurance. Once the amount you have paid in coinsurance reaches this maximum, the plan pays 100 percent of all covered expenses for the rest of the plan year.

# YOUR BENEFITS AT A GLANCE

The charts that follow show some of your major costs under the Basic, Basic Plus and Select plan options. As you'll see, your cost under any option is less when you choose providers who belong to Aetna's network.

	The Basic Plan		The Basic Plus Plan	
Primary Care Doctor's Office Visit	Network \$30 copay	Non-Network 40% after deductible	Network \$25 copay	Non-Network 35% after deductible
Eye Exams (1 every 2 years)	\$40 copay	40% after deductible	\$35 copay	35% after deductible
Emergency Services*	\$150 copay	\$150 copay	\$125 copay	\$125 copay
Hospital Services	20% after deductible	40% after deductible	15% after deductible	35% after deductible
Annual Deductible**				
• Individual	\$950	\$2,000	\$750	\$1,500
• Family	\$1,900	\$4,000	\$1,500	
Coinsurance Percentage	20%	40%	15%	35%
Coinsurance				
• Individual	\$2,500	\$8,000	\$2,500	\$4,000
• Family	\$5,000	\$16,000	\$5,000	\$8,000
Lifetime Maximum Benefit	None	\$1,000,000	None	\$1,000,000
Prescription Drugs	\$50 deductible	\$50 deductible	\$25 deductible	\$25 deductible
• Retail (up to 30-day supply)	\$10 copay generic	\$10 copay and 40% generic	\$8 copay generic	\$8 copay and 35% generic (formulary)
	\$30 copay brand-name (formulary)	\$30 copay and 40% brand-name (formulary)	\$25 copay brand-name (formulary)	\$25 copay and 35% brand-name (formulary)
	\$50 copay brand-name (non-formulary)	\$50 copay and 40% brand-name (non-formulary)	\$45 copay brand-name (non-formulary)	\$45 copay and 35% brand-name (non-formulary)
• Mail order (up to 90 day supply)	\$25 copay generic	Not applicable	\$20 copay generic	Not applicable
	\$75 copay brand-name (formulary)	Not applicable	\$62.50 copay brand-name (formulary)	Not applicable
	\$125 copay brand-name (non-formulary)	Not applicable	\$112.50 copay brand-name (non-formulary)	Not applicable
(mail order service is network benefit)				

\*Member is responsible for 50% of emergency room charges if visit was non-emergency.

\*\*Does not apply to services that have a copay.

\*\*\*Does not include the annual deductible.

## YOUR PRESCRIPTION DRUG BENEFITS

*A three-tier plan.*

The Health Plan offers prescription drug benefits through Aetna that help you and your family save on both short-term and long-term medication. Here's how:

- You can fill short-term prescriptions up to a 30-day supply — at any retail pharmacy. After you've met the deductible, you'll pay a copay when you pick up your medication from a network pharmacy. If you use a non-network pharmacy, you'll also pay a coinsurance.
- You can fill long-term prescriptions — up to a 90-day supply — through the plan's mail order service. To order, contact Aetna's Member Services and request a mail-order form. You can order refills online at Aetna Navigator.

The chart in ***Your Benefits at a Glance*** shows prescription drug copay amounts for each of the three Health Plan options. You'll see that there are three levels, or tiers, of copays. **When you use a network pharmacy, you pay the lowest copay when your doctor prescribes a generic drug, a higher copay for a brand-name drug on the plan's formulary list, and the highest copay for a brand-name drug not on the list.**

You pay the most out of your pocket when you use a non-network pharmacy. To find an Aetna network pharmacy, you can search DocFind at [www.aetna.com](http://www.aetna.com) or call Aetna's Member Services.

**What is the formulary?** It's a list of preferred drugs that includes both brand-name and generic drugs and is designed to provide access to quality, affordable outpatient prescription drug benefits. You can see the most recent list at [www.aetna.com](http://www.aetna.com) or call Aetna's Member Services.

### AETNA

One of the nation's leading providers of health benefits.

The City of Fort Worth has chosen Aetna as our claims administrator. Aetna is one of the nation's largest, oldest and most experienced providers of health care benefits and services. It has been offering health plans to businesses and their employees since 1899, and today more than 13 million Americans have chosen Aetna as their health care partner. Aetna offers you:

- A nationwide network of more than 633,000 doctors, hospitals and other health care providers. Aetna's network is one of the largest in the Metroplex and includes primary care physicians as well as a wide range of specialists. **DocFind** gives you the most recent information on network doctors, hospitals, dentists, pharmacies and other providers. You can search for a network doctor in your area and learn about his or her credentials and practice, including education, board certification and languages spoken. **DocFind** is also available directly from [www.aetna.com](http://www.aetna.com) without having to register for Aetna Navigator.)
- Responsive customer service. One of the top reasons we chose Aetna is for its excellent service. When you need help with a claim or benefit, you can call or visit Aetna's dedicated service center in Arlington and talk with a team of benefits professionals who have in-depth knowledge of our plan.



■ **Aetna IntelliHealth®**, a health Web site — accessed at **www.aetna.com** — credible, easy-to-understand consumer health information and interactive tools. With IntelliHealth, you can search on a wide variety of topics, from specific health conditions and their treatment to the latest developments in disease prevention, wellness and fitness.

■ **Healthwise® Knowledgebase**, a decision-support tool that provides information on thousands of health-related topics to help you make better decisions about health care and treatment options.

■ **Estimate the Cost of Care**, a suite of interactive Web-based cost tools that allows you to compare costs using in-network and out-of-network providers for prescription drugs, medical procedures, office visits and medical tests, and shows you potential cost savings when you use in-network providers.

Healthwise® Knowledgebase is a registered trademark of Healthwise, Incorporated.

## HOW TO REGISTER

Once you enroll in the health plan, you can register with Aetna Navigator.

- Go to **www.aetna.com** and select Aetna Navigator.
- Click on the “Register” link.
- Provide the information requested to verify that you are an Aetna member.
- Select a user name, password and security phrase.

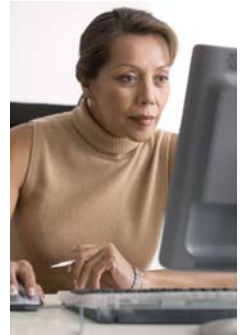
Once your registration is complete, you will use your user name and password to access Aetna Navigator. Personal information, such as claims data and Explanation of Benefits statements, will be available 10 days after you register.

## SPECIAL PROGRAMS

In addition to great online services and resources, Aetna offers special programs that address specific health care needs. All of these programs are available to you and your family at no extra cost. To learn more about these programs visit **www.aetna.com** or call Aetna’s Member Services at **888-398-4467**.

- The toll-free Informed Health® Line, **800-556-1555**, is staffed by registered nurses who can give you the latest information on a variety of health conditions and help you understand your treatment choices.
- The National Medical Excellence Program® helps you and covered family members receive care from nationally recognized doctors and facilities specializing in organ transplants and certain other treatments.
- The Vision One® Discount Program offers discounts on eyeglasses, contacts and other eye care products, as well as LASIK surgery.
- The Alternative Health Care program provides discounts on vitamins, nutritional supplements and natural products, plus special rates on alternative therapies such as acupuncture and massage.
- The Fitness Program provides discounts on health club memberships and certain home exercise equipment through GlobalFit™, one of the country’s largest providers of services.

Vision One® is a registered trademark of Cole Vision Corporation. GlobalFit™ is a trademark of Global Affiliates, Inc.



***Know Where  
To Search For  
Special  
Programs***



## WHEN YOU NEED HELP OR INFORMATION

*Web and telephone resources.*

When you need answers, help or information about your health coverage plan coverage, you have a choice:

**Call Aetna's Member Services at  
888-398-4467.**

Aetna representatives will answer questions about what's covered under the plan. They also can help with claims and plan requirements such as precertification, help you find a network provider in your area, and help you get a new or replacement ID card.

**Visit Aetna's Web site, [www.aetna.com](http://www.aetna.com).**

There you'll find Aetna's online provider directory and a host of information and self-service features. You even can contact Aetna's Member Services online.

**Contact the Benefits Division in Human Resources -**

Located in City Hall, Lower Level, it can provide claim forms, process name or address changes and help process family life status changes such as marriage, divorce or the birth of a child. Call **817-392-7782**.

## YOUR PLAN FOR BETTER HEALTH

For most people, a Health Plan is the most important — and most-used — employee benefit. That's why the City of Fort Worth is committed to providing a plan that combines comprehensive coverage with services that emphasize wellness, prevention and good health for life.

We hope you'll use this guide and refer to it often to better understand and use your Health Plan. We also hope you will use Aetna Navigator and Aetna's special programs to stay informed about your plan and the health topics most important to you and your family. It is important to us — and to you — that you get the most value from your plan.



**Get Additional Information Here!**

# DENTAL PLAN

As of January 1, 2008, the City of Fort Worth will now offer **four** dental options through CIGNA Dental Health:

2 **High and Low Option Dental Choice (DPPO)**, Indemnity-PPO Plans.

2 **High and Low CIGNA Dental Care (DHMO)**, a “Managed” Dental Plan that functions much like a Health Maintenance Organization (DHMO). **No referral is needed to see a specialist on the Low DHMO, but is required for the High DHMO.**

The copays outlined in the Patient Charge Schedule apply to in-network General dentists only. **Discounts** only apply to services provided by specialists and out-of-network dentists **under the Low DHMO plan**. Each option emphasizes preventive dental care through regular check-ups and cleanings at minimal or no cost to you. **Under the High DHMO plan, services performed by a Specialist are at the co-pay level.**

If you choose to participate in a dental plan, you can pay your premiums with pre-tax dollars through payroll deduction.

	Dental Care (DHMO)		Dental Choice (DPPO)	
Plan Feature	DHMO – Low Option (KISV6)	DHMO – High Option (KIV6)	Low Option – PPO	High Option – PPO
Deductible	None	None	\$50 per person	\$50 per person
Annual Maximum	None	None	\$1,000 per person	\$1,500 per person
Provider	Member must use Participating Provider	Member must use Participating Provider	Unlimited – PPO network available	Unlimited – PPO network available
Class I – Preventive & Diagnostic Care	You pay fixed copayments according to the plan's schedule of benefits	You pay fixed copayments according to the plan's schedule of benefits	Plan pays 100% with no deductible	Plan pays 100% with no deductible
Class II – Basic Restorative Care	You pay fixed copayments according to the plan's schedule of benefits – <b>Referral to a Specialists is not required under this plan but Specialist charges –no fees are paid by Cigna – payments are at a Discount ONLY</b>	You pay fixed copayments according to the plan's schedule of benefits – <b>Referral is required under this plan</b>	Plan pays 50%	Plan pays 80%
Class III – Major Restorative Care	You pay fixed copayments according to the plan's schedule of benefits	You pay fixed copayments according to the plan's schedule of benefits	Plan pays 50%	Plan pays 50%
Class IV – Orthodontia Lifetime Maximum	You pay fixed copayments according to the plan's schedule of benefits	You pay fixed copayments according to the plan's schedule of benefits	Not Covered	Plan pays 50% \$1,000 Dependent children to age 19
Class IX – Implants Deductible Annual Maximum	Not Covered	Not Covered	Not Covered	50% Subject to plan deductible Subject to plan annual maximum

For more information concerning the dental benefit, please call **800-244-6224**. Or contact the Benefits office at **817-392-7782** or <http://www.cfwnet.org/benefits/index.htm>.



# LONG TERM DISABILITY

The City of Fort Worth has chosen Standard Insurance Company to provide group Voluntary LTD (Long Term Disability) coverage to eligible employees. To be an eligible member you must be an active employee of the City of Fort Worth and regularly working at least 30 hour per week.

LTD insurance is designed to pay a monthly benefit to you in the event you cannot work because of a covered illness or injury.

The City's plan provides you with several options of income protection to replace 20, 40 or 60% of your earnings, to a maximum monthly benefit of \$3,000, \$6,000 or \$9,000, depending on the plan option you choose.

Premiums will depend on your current covered annual salary, age and on the percentage of coverage you elect. Premiums will increase as your salary increases and as you age. **See the example below.**

For a current premium chart or if you have any additional questions, please contact your Human Resources Representative at 817-392-7782 or log on to the City's website at <http://www.cfwnet.org/benefits/LTD/index.htm>.

<i>Annual Salary</i>	<i>\$35,000</i>	<i>\$45,000</i>	<i>\$50,000</i>
<b>Age</b>	35 years	40 years	50 years
<b>Premium Rate</b>	\$0.33	\$0.19	\$1.71
<b>Percentage</b>	40%	20 %	60%
<b>Waiting Period</b>	90 days	180 days	90 days
<b>Semi-Monthly Premium</b>	<b>\$4.82</b>	<b>\$3.57</b>	<b>\$35.63</b>

<b>How to Calculate the Semi-Monthly Premiums</b>	
1. Divide your annual salary by 12	<b>\$2,916.67</b>
2. Divide the premium rate by 100	<b>\$.0033</b>
3. Multiply line 1 by the amount shown on line 2	<b>\$9.63</b>
4. Divide line 3 by 2	<b>\$4.82</b>

\* A current premium rate chart is available in the Benefits Office or at <http://cfwnet.org/benefits>.



# FLEXIBLE SPENDING ACCOUNTS



**Want to Save Some Money**

You can reduce the dollars you pay in income taxes by participating in the City's Flexible Spending Accounts administered by Taxsaver Plan. Both the Health Care Spending Account and Dependent Care Spending Account let you pay for covered expenses with pre-tax dollars.

You decide how much money you want to contribute to each account throughout the year. The money comes out of your pay before taxes are taken out. This reduces your taxable pay and, as a result, your taxes. Pick up an enrollment packet in HR or go to [www.taxesaverplan.com](http://www.taxesaverplan.com) or the City's website:

<http://www.cfwnet.org/benefits>.

*Adoption benefits are also provided by a Flexible Spending Account, but you should contact Taxsaver or Benefits before enrolling in this program.*

To use the accounts, you pay for eligible expenses and are then reimbursed from your account. Or, you can sign up for a debit card and use it to pay for eligible medical expenses. The money is then deducted directly from your account. This allows you to pay for services directly with the money in your Flexible Spending Account instead of waiting for a reimbursement. The card is only available for the Health Care Spending Accounts.

With the Health Care Spending Accounts, it is important to **plan carefully for your expenses because you will lose any unused dollars remaining in your account after December 31st**. However, you will find that there are numerous items that are eligible expenses. A brief list is below, or check out [www.taxesaverplan.com](http://www.taxesaverplan.com) to see a more in-depth list.

## ELIGIBLE EXPENSES INCLUDE:

Health Care Spending Account (Contribute up to \$4,200 per year)	Dependent Care Spending Account (Contribute up to \$5,000 annually - if filing jointly \$2,500 annually per person – if filing separately)
<p>Out-of-pocket expenses for:</p> <ul style="list-style-type: none"> <li>☐ Deductibles</li> <li>☐ Copayments</li> <li>☐ Coinsurance</li> <li>☐ Dental Charges</li> <li>☐ Eye exams/eyeglasses/contact lenses</li> <li>☐ Lasik surgery</li> <li>☐ Expenses exceeding medical or dental plan benefits limits</li> <li>☐ Expenses not covered by the City's health plans but permitted by IRS regulations</li> <li>☐ Over the Counter Medications</li> </ul>	<p>Expenses for child or adult dependent care that allow you (and your spouse if you're married) to work outside your home:</p> <ul style="list-style-type: none"> <li>☐ Child care</li> <li>☐ Baby-sitting inside or outside your home*</li> <li>☐ Adult care inside or outside your home*</li> <li>☐ Charges for education or tuition <b>cannot</b> be included in this account</li> </ul> <p><i>*If you use the account for baby-sitting or adult care inside or outside your home, the individual who cares for your dependent(s) must have a tax identification number, and you must claim the child or adult on your taxes.</i></p>

Please call Taxsaver Plan at **800-328-4337** for more information or the Benefits office at **817-392-7782**.

# LIFE INSURANCE

The City of Fort Worth offers Group Term Life and Accidental Death & Dismemberment (AD&D) and Group Universal Life and AD&D Insurance through Aetna. Universal Life Insurance is also offered through MetLife.

**CITY PROVIDED Group TERM LIFE INSURANCE** - is designed to provide financial protection for your family against the unexpected. The City of Fort Worth provides you with \$10,000 Group in Term Life Insurance at no cost to you, if you are an active, full-time employee. This policy also includes an Accidental Death and Dismemberment (AD&D) provision, which provides an additional \$10,000 benefit for death caused by an accident, if death occurs within 90 days following the accident.

The City provides a “living benefit” if you become terminally ill by allowing the use of a portion of the life insurance benefits for a terminally ill employee or spouse, while they are living, to use as they find necessary.

## GROUP UNIVERSAL LIFE AND AD&D INSURANCE ALSO AVAILABLE THROUGH AETNA -

How much life insurance you need depends on your income and how much your family will need in the event of your death. If you would like coverage beyond what is paid for by the City of Fort Worth, you may buy additional Group Universal Life and AD&D Insurance for yourself and your eligible dependents in accordance with plan guidelines.

- ▣ You may purchase additional coverage for yourself at a flat \$20,000 benefit or one, two or three times your annual base salary up to a \$375,000 maximum benefit, whichever is less.



**Don't Forget About Life Insurance**

- You may enroll your spouse at a flat \$20,000 benefit or one, two or three times your annual salary up to a \$50,000 maximum benefit, whichever is less. (Note: the employee must be covered in order to elect spouse coverage, and the spouse coverage amount cannot exceed the employee coverage amount.)
- Each child may be covered for \$10,000 for \$.35 semi-monthly regardless of the number of children. (Note: the employee must be covered in order to elect the children's coverage.)

The Aetna Group Universal Life and AD&D insurance coverage for employees and spouses will be reduced by 40 percent at age 65. AD&D benefits will terminate at age 70.

You must enroll yourself and your eligible dependents within the first 30 days of eligibility or you will be required to provide evidence of good health.

You can keep the Group Universal Life Insurance if you do leave the City by paying Aetna directly. The cost will be the same as if you were a City employee. Please note, this is only in effect as long as the City keeps the Aetna policy in effect.

Please call the Benefits office at **817-392-7782** for more information on this program.

## UNIVERSAL LIFE INSURANCE THROUGH TEXAS LIFE -

Permanent Life Insurance coverage also is available through Texas Life Insurance, a MetLife affiliate. Permanent coverage allows you to take your policy with you when you retire or change jobs by paying premiums directly to Texas Life.

You may select permanent coverage for yourself, your spouse and dependent children — even your grandchildren — all with the ease of payroll deductions.

Call your MetLife Financial Services Executive, at **817-428-3011** to apply for coverage, for more information, or to schedule an appointment.

**But  
Wait!**

*There's Additional Information!!*





# RETIREMENT SAVINGS PLAN

## CITY OF FORT WORTH RETIREMENT PENSION PLAN

The City of Fort Worth also has its own retirement pension system (defined benefit plan) for its eligible employees. This benefit will assist employees in helping provide for a financially secure future. Benefits paid out of the fund come from employee contributions, the City of Fort Worth's contributions and any interest earned on investments. All eligible employees are vested after five years of service. Below are the percentage amounts of pay that are contributed by employees and the City.

	Employee Contribution	City Contribution
General Employees	8.25%	15.74%
Fire Employees	8.25%	15.74%
Police Employees	8.73%	16.46%

For normal retirement, General and Fire employees may retire when any combination of years of service and age equals 80. Police employees may retire after 25 years of service.

Your pension benefit at retirement will be based on a combination of your base pay, length of service with the City and your age at the time you retire.

To view a detailed retirement handbook go to the City's intranet site at

<http://www.fwretirement.org> or call **817-632-8900** for more information.

## DEFERRED COMPENSATION RETIREMENT SAVINGS PLAN

The City's 457 Plan offers two investments to help employees meet their retirement needs — one program is offered by Nationwide Retirement Solutions and the other by ICMA-RC.

The 457 plan is similar to a 401(k) or 403(b) and is available to city employees to help supplement their pension. Both programs offer payroll deduction and reduce your taxable income, allowing you to save more money than if you were to invest on your own.

When you "defer" your compensation and save and invest for your retirement, you are postponing payment on your federal taxes until your assets are withdrawn, which usually is during retirement when you may be in a lower tax bracket. It is simply a smarter and easier way of reaching your retirement goals.

As a City of Fort Worth employee you are allowed to defer up to \$15,500 total for 2007. If you are over 50 years of age, you can contribute an additional \$5,000 total. If you are within three years of your normal retirement date, and have declared your retirement date with the 457 plan, you may defer up to \$31,000 in 2007. The annual limitations change annually and are normally announced by the IRS in November.

Both programs offer a range between high and minimal risk investment opportunities with competitive returns and no tax penalties regardless of age when funds are withdrawn.

For more information, please contact: ICMA-RC at **866-886-8023** or [www.icmarc.org](http://www.icmarc.org) or Nationwide at **877-677-3678** or [www.nrsforu.com](http://www.nrsforu.com).

# EMPLOYEE ASSISTANCE PROGRAM

To help you cope with personal concerns, alcohol/substance abuse problems and professional issues, The City of Fort Worth offers an Employee Assistance Program (EAP) —This benefit is confidential and is provided at no cost to you. This benefit is also a resource to help you and your eligible dependents deal with a range of workplace and personal issues — big and small.

## HOW DO I USE THE INTERNAL EAP?

- ▣ Call **817-392-7789** between 8 a.m. and 5 p.m. weekdays.
- ▣ Schedule an appointment with the City's EAP coordinator.
- ▣ You may leave a voicemail message after 5 p.m. and on weekends.

## WHAT DO I NEED TO KNOW WHEN I CALL THE EMPLOYEE ASSISTANCE PROGRAM?

- ▣ After a consultation, EAP will refer you to an appropriate community or mental health resource, if necessary.
- ▣ Your job security and promotion opportunities are not endangered if you participate in EAP. The service is completely confidential (except under circumstances mandated by law). Call the EAP coordinator at the phone number above to obtain more details.



*Everybody Needs Help Sometime*



# WELLNESS PROGRAM

*Have Fun  
and Stay  
Healthy*

Healthy Challenge is the Employee and Retiree Wellness Program that rewards full-time, benefit-eligible employees and retirees for maintaining and/or improving their health during the year. By participating in the annual Health Screening and completing a Health Risk Assessment (HRA) questionnaire,

all full-time, benefit-eligible employees, and retirees are eligible for the Wellness Award Payout Program. To qualify, employees and retirees must complete two HRA's (one year apart), and meet at least six (6) of the thirteen (13) Health Criteria.

The Wellness Award Payout Program is as follows:

Employees			Retirees (on City Health Plan insurance)
# of Criteria Met	Aetna	Non-Aetna	Aetna
6 Criteria Met =	\$50 or 3 hours	3 hours	\$50
7 Criteria Met =	\$100 or 6 hours	6 hours	\$100
8 Criteria Met =	\$150 or 9 hours	9 hours	\$150
9 Criteria Met =	\$200 or 12 hours	12 hours	\$200
10+ Criteria Met =	\$250 or 15 hours	15 hours	\$250

*\*WL= Wellness Leave. This leave is not accruable and is not payable upon termination. It must be used in the year in which it is earned.*

**Other wellness services** include health seminars, classes, disease management programs, fitness center discounts, wellness Web site, wellness library and a *Better Health for Life* (active employees) and the Better Health for Retiree Life (retirees) newsletters.

For specific criteria details, or more information, visit the City's intranet site at <http://www.cfwnet.org/Wellness> or contact the Wellness Program at **817-392-2623**.





# VOLUNTARY BENEFITS



Wait!  
There's More

The following programs are offered as a convenience to you as a City employee and are available through payroll deductions. The City does not administer nor sponsor these plans. You contract individually with the applicable providers.

## AFLAC INSURANCE

AFLAC personal insurance policies are offered to you through payroll deduction with the City of Fort Worth. The benefits programs offered provide cash directly to you for family expenses and include the following:

### ▣ **Personal Accident Indemnity Plan -**

Helps provide a financial cushion in the event of an accident, to include Off-the-Job Disability Riders

### ▣ **Personal Disability Income Protector -**

Helps give you peace by providing a source of income while you concentrate on getting better

### ▣ **Cancer Indemnity Protection Policy -**

Helps offset the medical and non-medical expenses related to cancer treatment

### ▣ **Hospital Intensive Care Policy -**

Covers confinement in hospital intensive care units

### ▣ **Hospital Confinement Indemnity Policy -**

Helps offset the non-covered expenses associated with a hospital stay

▣ **Life Protector Policy** – Provides individually owned protection, either term with or without a Return of Premium Benefit and whole life cash benefits such as a First-Occurrence Benefit and Hospital confinement and Continuing Care Benefits for events like heart attacks, coronary artery bypass surgeries and strokes, end-stage renal failure, major organ transplants, major third-degree burns, comas and paralysis

### ▣ **Specified Health Event Policy –**

Offers cash benefits such as a First-Occurrence Benefit and Hospital Confinement and Continuing Care Benefits for events like heart attacks, coronary artery bypass surgeries and strokes, end-stage renal failures, major organ transplants, major third-degree burns, comas and paralysis

### ▣ **Hospital Confinement Sickness**

**Indemnity** - Helps offset non-covered expenses associated with physician visits, hospital confinement, major diagnostic exams and surgery

These are personal policies that may be converted to bank draft or credit card payment upon retirement or termination of employment with the City of Fort Worth.

For more information call Sheila Patterson  
**817-223-9582 or e-mail**  
**[Sheila\\_patterson@us.aflac.com](mailto:Sheila_patterson@us.aflac.com)**.



## Allstate

### (American Heritage Insurance)

Additional benefits are available through Allstate (American Heritage) on a payroll basis. Options provided by Allstate are:

#### ACCIDENT PLAN:

- ▣ Disability income for primary insured
- ▣ Accidental Death and Dismemberment benefit
- ▣ Regular Ambulance and Air Ambulance benefits
- ▣ Doctor bills, X-rays, etc.
- ▣ Coverage for dislocations and fractures (see policy)
- ▣ Optional Sickness Disability Income (primary insured only)
- ▣ Hospital Confinement Benefit (see policy)
- ▣ Sickness Hospital Confinement and Outpatient Physicians (treatment riders can be added to this policy)

#### SUPPLEMENTAL HEALTH OPTIONS PLAN (SHOP):

To help meet out-of-pocket costs and the indirect cost of hospital confinement, American Heritage offers SHOP. The base policy pays a daily benefit for hospital confinement.

#### CRITICAL ILLNESS:

Pays a lump sum benefit when you are diagnosed with a critical illness. Basic benefit amounts of \$5,000 to \$100,000 to meet your individual needs. Some of the schedule benefits the Critical Illness Policy pays for are:

- ▣ Heart Attack
- ▣ End Stage Renal Failure
- ▣ Stroke
- ▣ Major Organ Transplant
- ▣ Paralysis
- ▣ Alzheimer's Disease
- ▣ By-pass Surgery
- ▣ Angioplasty, Atherectomy, Stint Placement
- ▣ Multiple Sclerosis
- ▣ Cancer Rider

Other plans available include: Disability Income Protection Plan, Cancer/Specified Disease Plan and Heart Care Plus.

For more information, call **817-294-4818** (inside Fort Worth) or **800-749-3830** (outside Fort Worth).

## CONTINENTAL CASUALTY (CNA)

CNA offers long-term care insurance to you and your eligible family members including your spouse, parents and grandparents.

You may enroll within 31 days of initial employment by completing an enrollment form. If you choose to wait, you will be required to fill out a short application and does not guarantee approval of coverage. Premiums for you and your spouse will be paid through payroll deduction on an after-tax basis. CNA Insurance will bill parents and grandparents directly for their premiums. Please call **800-528-4582** for more information.

## FORT WORTH CITY CREDIT UNION

The credit union is open to you, your spouse and your dependent children as soon as your employment with the City of Fort Worth begins. All you have to do is pay a \$1 membership fee and deposit \$25 or more to open a savings account. For more information, visit [www.fwccu.org](http://www.fwccu.org) or call **817-732-2803**.

## LIBERTY MUTUAL: Auto& HOMEOWNER'S INSURANCE

As an employee of the City of Fort Worth, you have greater access to auto, home and other personal lines of insurance with convenient payment options: automatic payroll deductions, automatic checking draft and/or direct bill at home. For mortgage escrow, Liberty Mutual can bill your mortgage company directly.

To ask a question, get a quote\*, request service or file a claim, contact Liberty Mutual directly.

### Local Area Sales and Service Offices

*Quotes and Service*

**817-572-2088 or 817-332-9626**

### 24 Hours a day over the Internet

[www.libertymutual.com/lm/fortworth](http://www.libertymutual.com/lm/fortworth)

### Extended Hours Call Center

**For Quotes 800-524-9400**

8 a.m. - 10 p.m. EST (Monday - Friday)  
9 a.m. - 4 p.m. EST (Saturday)

### Extended Hours Call Center

**For Service 800-837-5249**

8 a.m. - 11 p.m. EST (Monday - Friday)  
8 a.m. - 6:30 p.m. EST (Saturday)

### Claims Service

**800-713-7379**

Or you can file your claim online at  
[www.web-worx.com/liberty/claims/](http://www.web-worx.com/liberty/claims/)

*\*To the extent permitted by law, applicants are individually underwritten; not all applicants may qualify.*



## PRE-PAID LEGAL SERVICES

Legal advice and guidance is available on retainer through Pre-Paid Legal Services. For \$6.90 per pay-period, City of Fort Worth employees and their family can receive the following benefits from their contracted law firm:

- ▣ Legal consultation and advice by phone on any subject matter
- ▣ Letters and phone calls on your behalf
- ▣ Contract and document review
- ▣ Will preparation
- ▣ Motor vehicle legal services
- ▣ Trial defense services
- ▣ IRS audit legal services

Membership entitles you to these services at no additional charge for a specified number of hours, depending on length of time in the program.

### PREFERRED MEMBER DISCOUNT -

Any other legal services not otherwise covered by your membership are available at a 25 percent discount from your provider firm's standard hourly rate, a significant preferred member discount for issues such as bankruptcy, child custody and other family law issues. Your provider law firm must have five days notice prior to court representation. A retainer fee normally will be required before services can be rendered under the Preferred Member Discount benefit.

For more information call at **817-448-8018**.

## Identity Theft

*Identity Theft* has become the fastest growing crime in America today. Because of this problem the City of Fort Worth Employee Benefits Committee has made available to all employees a proactive plan to help make the aware of how they may be vulnerable to this problem and ways to protect themselves and their family.

There is a monthly fee of \$9.95 to participate in this program. Contact Don McKinney at 817-448-8018 for more details.

## U.S. SAVINGS BONDS

U.S. Savings Bonds are available through payroll deduction. National Bond and Trust Company (NBT) administers the program.

- You can participate for as little as \$11.54 per pay period
- Guarantee returns over and above the rate of inflation for up to 30 years
- Liquid investment — can be cashed in anytime after 1 year
- Federal income tax deferred until redeemed or 30 years

To enroll or get more information, call **800-426-9314**. You can also visit **[www.nbtco.com](http://www.nbtco.com)** to find an agent, to email questions and changes, or to get additional information on Savings Bonds. This website also provides a means of sending an e-mail to the company.

# WORK/LIFE BENEFITS

**VACATION LEAVE** is available to all permanent full-time or permanent part-time employees and is accrued according to the following schedule:

Years of Service		
General Employees	Civil Service	Days Accrued/ Year
0-5	1-4	15
6-10	5-9	17
11-15	10-14	18
16-20	15-19	20
21+	20+	23

**HOLIDAYS** are paid to all permanent full-time and permanent part-time employees. Eight are scheduled, and employees receive one personal holiday for a total of nine holidays per year. Scheduled holidays are New Year's Day, Martin Luther King Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, the day after Thanksgiving, Christmas Day, and a personal day that may be used anytime during the calendar year.

**LONGEVITY PAY** is a reward for your long, committed employment service with the City of Fort Worth. Those eligible for Longevity Pay include all permanent full-time and permanent part-time General employees (except for department directors and appointed officials).

The General employee Longevity schedule is as follows:

- ▣ After 3 Years Continuous Service = \$300/year
- ▣ After 6 Years Continuous Service = \$600/year

- ▣ After 9 Years Continuous Service = \$900/year
- ▣ All sworn Police and Fire employees are given \$4 a month times their years of service, up to a maximum of \$100/month at 25 years of service.

## **TUITION REIMBURSEMENT -**

The City of Fort Worth has an education reimbursement program. To be eligible, an employee must have successfully completed probation. For more information, please refer to the Tuition Reimbursement intranet site at <http://www.cfwnet.org/benefits/tuition.htm> or call Learning Services at **817-392-8041**.

## **EMPLOYEE WORK/LIFE**

**PROGRAM -** This City of Fort Worth-supported program helps employees balance the needs of their families with the demands of their jobs. For more information on this program, please contact **817-392-2623** or visit <http://www.cfwnet.org/partners/worklife.htm>.

## **CHILD CARE DISCOUNTS -**

City of Fort Worth employees are offered a 10 percent discount at participating childcare facilities. For more information on participating facilities and their descriptions, please visit the City's intranet site at <http://www.cfwnet.org/benefits/childcare.htm>.

## **HEALTH CLUB MEMBERSHIP DISCOUNTS -**

The City of Fort Worth employees may receive discounted membership rates at various health clubs. Call **817-392-7753** for more information.

# GLOSSARY OF TERMS

## **DEPENDENT CARE SPENDING ACCOUNT -**

The Dependent Care Spending Account lets you use untaxed income to pay for the daytime care of your child(ren) (up to age 13) or other dependents, including adults (an invalid parent, for example).

## **FAMILY STATUS CHANGE -**

Election changes in pre-tax benefit plans can be made only in the event of a change in family status due to a change in eligibility because of the following:

- ▣ You get married or divorced
- ▣ You add a dependent child through birth, adoption or change in custody
- ▣ Your spouse or dependent dies
- ▣ You or your spouse has a change of employment status that affects benefit coverage
- ▣ You or your spouse experience an involuntary loss of other group benefit coverage

**FLEXIBLE SPENDING ACCOUNTS -** Flexible Spending Accounts (FSAs) let you pay for certain eligible expenses with income that is tax free. You may choose to have money taken from your paycheck before taxes are taken out (untaxed income) and set the funds aside in a separate account.

There are two types of FSAs - a Health Care Spending Account and a Dependent Care Spending Account. Contributions to the Health Care Spending Account may not be used for Dependent Care expenses and vice versa. Any funds remaining in your accounts at the end of the year must be forfeited according to federal law.

## **HEALTH CARE SPENDING ACCOUNT -**

The Health Care Spending Account lets you use untaxed income to pay for out-of-pocket medical expenses, like deductibles and co-payments, or the cost of eyeglasses and contact lenses.

**OPEN ENROLLMENT -** Open Enrollment is a specified time period when you can enroll in the various benefit options offered by the City of Fort Worth. For the Group Health, Dental, and Flexible 125 benefit, Open Enrollment is the only time when you can add or make changes to pre-tax benefits coverage in the City of Fort Worth's benefits program. Your elections take effect on January 1 and remain in place through December 31, unless you experience a change in family status. Other benefits besides the Group Health, Dental and Flexible 125 benefit may have ongoing enrollment opportunities.

**PAYROLL DEDUCTION -** A specified dollar amount is deducted from your pay and is applied toward benefits that you have elected.

**PRE-TAX DOLLARS -** A non-taxable portion of your salary used to pay for contributions (dependent medical and dental) or set aside in the Health Care or Dependent Care Spending Accounts.

**NETWORK PROVIDER -** This is a health care provider (in-network) who has agreed by contract to furnish medical services to members of a health plan at negotiated rates.

This Benefits Guide is designed to inform potential, new or current City of Fort Worth employees about the company's benefits program. Information contained within this brochure does not replace or alter the official documents that legally govern the terms and operation of a plan, policy or procedure described. If this brochure differs from the official documents of a plan, policy or procedure, the official plan documents always govern. The City of Fort Worth reserves the right to amend, modify or terminate any plan, policy or procedure described at any time. ©2008